

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FLING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		8				
10		8				
11		8				
12		8				
13		8				
14		8				
15		8				
16		8				
17	1					
18		1				
19		1				
20		1				
21		1				
22		1				
23		1				
24		1				
25		8				
26		8				
27		0				
28		0				
29		0				
30		0				
31		0				
32		0				
33		0				
34		0				
35		0				
36		0				
37	1					
38	1					
39		2				
40		2				
41		1				
42		1				
43		1				
44	1					
45		1				
46	1					
47		1				
48		1				
49		1				
50		1				
TOTAL IND.	6					
TOTAL DEP.	116					
TOTAL CLAIMS	122					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51		1				
52		1				
53		1				
54		1				
55		1				
56		1				
57		1				
58		1				
59		2				
60		2				
61		2				
62		2				
63		2				
64		2				
65		2				
66		1				
67		2				
68		1				
69		2				
70		2				
71		0				
72		0				
73		0				
74		0				
75		0				
76		0				
77		0				
78		0				
79		0				
80		0				
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.	46					
TOTAL CLAIMS	46					